

ROBERT-WILLIAM-MAWSON, SR.

- PLAINTIFF -

CASE# 3:16-CV-400

Vs.

JUDGE : \_\_\_\_\_

AND

THE PITTSTON CITY POLICE DEPT, AND

OFFICER SAMUAL DESIMONE, OFFICER -

: MAGISTRATE JUDGE: \_\_\_\_\_

-MR. FERANDUS, CHIEF ROBERT POWERS.

-DEFENDANTS-

APPLICATION TO PROCEED IN DISTRICT COURT WITHOUT PAYING FEES/COST

FILED  
SCRANTON

APR -8 2016

PER \_\_\_\_\_  
DEPUTY CLERK

April 8, 16

"RESPECTFULLY SUBMITTED"

Robert William Mawson, Sr.

ROBERT-WILLIAM-MAWSON, SR /PRO-se.

AO 240 (Rev. 06/09) Application to Proceed in District Court Without Prepaying Fees or Costs (Short Form)

## UNITED STATES DISTRICT COURT

for the

ROBERT-WILLIAM-MAWSON, SR

Plaintiff

v.

OFFICER SAMUAL DESIMONE ET.al.

Defendant

Civil Action No.

APPLICATION TO PROCEED IN DISTRICT COURT WITHOUT PREPAYING FEES OR COSTS  
(Short Form)

I am a plaintiff or petitioner in this case and declare that I am unable to pay the costs of these proceedings and that I am entitled to the relief requested.

In support of this application, I answer the following questions under penalty of perjury:

1. *If incarcerated.* I am being held at: no.

If employed there, or have an account in the institution, I have attached to this document a statement certified by the appropriate institutional officer showing all receipts, expenditures, and balances during the last six months for any institutional account in my name. I am also submitting a similar statement from any other institution where I was incarcerated during the last six months.

2. *If not incarcerated.* If I am employed, my employer's name and address are: not employed at this-  
time.

My gross pay or wages are: \$ 0, and my take-home pay or wages are: \$ 0 per  
(specify pay period) -----

3. *Other Income.* In the past 12 months, I have received income from the following sources (check all that apply):

(a) Business, profession, or other self-employment	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(b) Rent payments, interest, or dividends	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(c) Pension, annuity, or life insurance payments	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(d) Disability, or worker's compensation payments	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
(e) Gifts, or inheritances	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(f) Any other sources	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

If you answered "Yes" to any question above, describe below or on separate pages each source of money and state the amount that you received and what you expect to receive in the future.

\*\*\* SOCIAL SECURITY INCOME. APROX- \$ 680.00 amonth, every 3rd  
0f month .

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4. Amount of money that I have in cash or in a checking or savings account: \$ aprox. 30.00 bucks keep  
- account open . (SEE attached bank statement )

5. Any automobile, real estate, stock, bond, security, trust, jewelry, art work, or other financial instrument or  
thing of value that I own, including any item of value held in someone else's name (describe the property and its approximate  
value):

I HAVE 1, RUNNING VEHICLE, WORKING ON OTHER, NEEDS ENG, REPAIR

6. Any housing, transportation, utilities, or loan payments, or other regular monthly expenses (describe and provide  
the amount of the monthly expense): YES, APROX- \$240.00 IN VEHICLE FUEL AMONTH , V8-  
-HEMI TRUCK 4x4 , electric, food, coal, etc, .

7. Names (or, if under 18, initials only) of all persons who are dependent on me for support, my relationship  
with each person, and how much I contribute to their support:


I support my Daughter, clothes etc, I have a BIG dog a  
"ROTTY" , .

8. Any debts or financial obligations (describe the amounts owed and to whom they are payable):

PPL -ELECTRIC, COAL, TRUCK FUEL & INSURANCE .

*Declaration:* I declare under penalty of perjury that the above information is true and understand that a false  
statement may result in a dismissal of my claims.

Date: APRIL 8th, 2016

  
Applicant's signature  
Robert William Mawson Sr  
Printed name

ROBERT-WILLIAM-MAWSON, SR .PRO-Se,

Free Checking 7812247401  
Printed by: Debra Franko

FIDELITY D & D BANK

4/8/2016 10:29:39 AM  
Reporting Institution: 25

**Demand Deposit 7812247401 - ROBERT MAWSON**

	Relationship	Date of Birth	Phone Number	Tax Identification
ROBERT MAWSON	Owner/Signer	*** **, ****	*****	SSN ***-**-****
BERNADETTE MAWSON	Signer	*** **, ****	*****	SSN ***-**-****
164 MILL ST REAR PITTSTON PA 18640				

Additional Relationships  
Tax Name: ROBERT MAWSON  
See Mailing Information

**Mailing Label**

ROBERT MAWSON  
BERNADETTE MAWSON  
164 MILL ST REAR  
PITTSTON PA 18640

*SS I*  
*NOT WORKING*  
*At This time*

**Current & Previous Cycle**

Description	Debits	Credits	Date	Balance
Balance Forward:			Feb 12, 2016	\$10.70
COMM OF PA SSP DPWBE		\$22.10	Mar 01, 2016	\$32.80
NEFIT XXXXX6050-SSP00				
SSI TREAS 310 XXSUPP SEC		\$61.00	Mar 01, 2016	\$93.80
XXXXXX6050 SSI				
Miscellaneous Debit	\$80.00		Mar 02, 2016	\$13.80
SSA TREAS 310 XXSOC SEC		\$692.00	Mar 03, 2016	\$705.80
XXXXXX6050A SSA				
Miscellaneous Debit	\$680.00		Mar 03, 2016	\$25.80
****Statement Produced****			Mar 11, 2016	\$25.80
COMM OF PA SSP DPWBE		\$22.10	Apr 01, 2016	\$47.90
NEFIT XXXXX6050-SSP00				
SSI TREAS 310 XXSUPP SEC		\$61.00	Apr 01, 2016	\$108.90
XXXXXX6050 SSI				
SSA TREAS 310 XXSOC SEC		\$692.00	Apr 01, 2016	\$800.90
XXXXXX6050A SSA				
Miscellaneous Debit	\$780.00		Apr 01, 2016	\$20.90
Balance This Statement:			Apr 07, 2016	\$20.90

*April 8, 16*